AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

CONSUMER PRODUCT SAFETY COMMISSION
DIV OF PROCUREMENT SERVICES
4330 EAST WEST HWY
ROOM 523
BETHESDA MD 20814

8. NAME AND ADDRESS OF CONTRACTOR (Inc., street, county, State and Zip Code)

COLUCCI RAYMOND
FORT MYERS FL 33966-5717

10A. MODIFICATION OF CONTRACT/ORDER NO.
CPSC-N-14-0017

10B. DATED (SEE ITEM 13)
05/12/2014

The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of offers (a) is extended. (b) is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
0100A17RSE 2017 1117900000 EXHR004310 252ED
Net Increase: $109,090.00

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

X Exercise Option - Unilateral Modification, FAR 52.217-9

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: ************
HOSPITAL ID: 54582085/8A134065 LEE MEMORIAL
COR: Dennis Wierdak
Email: dwierdak@cpsc.gov
Tel: 301-504-7430

Modification # 0005 to contract CPSC-N-14-0017 is hereby issued to provide additional funding for option period two, and exercise option period three as follows:

1- The quantity for line item 0005 is increased by 3,000 to a new quantity of 50,000.

Continued...

15. NAME AND TITLE OF SIGNER (Type or print)
Greg A. Grayson

16. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)
Greg A. Grayson

(16C) DATE SIGNED
9 MAR 2017

(Signature of person authorized to sign)

STANDARD Form 30 (REV. 10-83)
Prepared by GSA
FAR (48 CFR) 53.243
2- As a result, funding is added for line item 0005 in the amount of $5,820.00.

3- The quantity for line item 0006 is increased by 1,000 to a new quantity of 10,000.

4- As a result, funding is added for line item 0006 in the amount of $490.00.

5- Line item 0006A is added in the amount of $1,500.00 in accordance with Section 6.C. (b) of the statement of work.

6- As a result of the above, funding for option period two (July 1, 2016 through June 30, 2017) is increased by $7,810.00 to a new total of $103,400.00.

7- In accordance with FAR Clause 52.217-9, Option to Extend the Term of the Contract, the Consumer Product Safety Commission hereby exercises option period three for the period beginning July 1, 2017 through June 30, 2018. Pricing is in accordance with line items 0007-0008.

8- The funded quantity for line item 0007 is increased from 0 to 49,000.

9- As a result, funding is added for line item 0007 in the amount of $96,530.00.

10- The funded quantity for line item 0008 is increased from 0 to 9,500.

11- As a result, funding is added for line item 0008 in the amount of $4,750.00.

12- As a result of the above, funding is added in the amount of $101,280.00 for option period three for the performance period July 1, 2017 through June 30, 2018. Additional funding will be provided via modification at a later date when funding becomes available.

Change Item 0005 to read as follows(amount shown is the obligated amount):

SECOND (2ND) OPTION PERIOD -  
JULY 1, 2016 THROUGH JUNE 30, 2017

Continued ...
<table>
<thead>
<tr>
<th>ITEM NO. (A)</th>
<th>SUPPLIES/SERVICES (B)</th>
<th>QUANTITY (C)</th>
<th>UNIT (D)</th>
<th>UNIT PRICE (E)</th>
<th>AMOUNT (F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0005</td>
<td>Not To Exceed: 50,000</td>
<td>3000</td>
<td>EA</td>
<td>1.94</td>
<td>5,820.00</td>
</tr>
</tbody>
</table>

NEISS Surveillance Reports and Special Survey Reports in accordance with the attached statement of work.

Change Item 0006 to read as follows (amount shown is the obligated amount):

<table>
<thead>
<tr>
<th>ITEM NO. (A)</th>
<th>SUPPLIES/SERVICES (B)</th>
<th>QUANTITY (C)</th>
<th>UNIT (D)</th>
<th>UNIT PRICE (E)</th>
<th>AMOUNT (F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0006</td>
<td>Not To Exceed: 10,000</td>
<td>1000</td>
<td>EA</td>
<td>0.49</td>
<td>490.00</td>
</tr>
</tbody>
</table>

NEISS Supplemental / Special Study Reports in accordance with the attached statement of work.

Add Item 0006 A as follows:

<table>
<thead>
<tr>
<th>ITEM NO. (A)</th>
<th>SUPPLIES/SERVICES (B)</th>
<th>QUANTITY (C)</th>
<th>UNIT (D)</th>
<th>UNIT PRICE (E)</th>
<th>AMOUNT (F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0006 A</td>
<td>NOT TO EXCEED: $1,500.00</td>
<td></td>
<td></td>
<td></td>
<td>1,500.00</td>
</tr>
</tbody>
</table>

Reimbursement for attendance at a NEISS-All-Trauma Coder Meeting at CPSC in Bethesda, MD in accordance with the attached modification to the statement of work.

Change Item 0007 to read as follows (amount shown is the obligated amount):

<table>
<thead>
<tr>
<th>THIRD-(3RD) OPTION PERIOD</th>
<th>JULY 1, 2017 THROUGH JUNE 30, 2018</th>
<th>QUANTITY (C)</th>
<th>UNIT (D)</th>
<th>UNIT PRICE (E)</th>
<th>AMOUNT (F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0007</td>
<td>Not To Exceed: 49,000</td>
<td>17400</td>
<td>EA</td>
<td>1.97</td>
<td>96,530.00</td>
</tr>
</tbody>
</table>

NEISS Surveillance Reports and Special Survey Reports in accordance with the attached statement of work.

Quantity: 49,000 @ $1.97 = $96,530.00

Change Item 0008 to read as follows (amount shown is the obligated amount):

<table>
<thead>
<tr>
<th>ITEM NO. (A)</th>
<th>SUPPLIES/SERVICES (B)</th>
<th>QUANTITY (C)</th>
<th>UNIT (D)</th>
<th>UNIT PRICE (E)</th>
<th>AMOUNT (F)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0008</td>
<td>Not To Exceed: 9,500</td>
<td>2700</td>
<td>EA</td>
<td>0.50</td>
<td>4,750.00</td>
</tr>
</tbody>
</table>

NEISS Supplemental / Special Study Reports in accordance with the attached statement of work.

Quantity: 9,500 @ $0.50 = $4,750.00

ALL OTHER TERMS AND CONDITIONS REMAIN UCHANGED Continued...
<table>
<thead>
<tr>
<th>ITEM NO. (A)</th>
<th>SUPPLIES/SERVICES (B)</th>
<th>QUANTITY (C)</th>
<th>UNIT (D)</th>
<th>UNIT PRICE (E)</th>
<th>AMOUNT (F)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>AND IN FULL FORCE AND EFFECT.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Addition to NEISS Statement of Work

Section 6.C Orientation and Training

(1) NEISS Coder Meeting

The Contractor/NEISS coder shall attend a training meeting covering case coding procedures and other NEISS/AII Trauma reporting activities.

The NEISS Coder Meeting will be held at or near CPSC in Montgomery County, Maryland at a location and dates to be determined. The meeting will be for 2 consecutive days sometime between March-August, 2017. Lodging will be provided at a hotel to be determined.

(2) Travel Costs. Airfare or train tickets shall be obtained by the Contractor. All training and travel costs shall be reimbursed in accordance with the following provisions and the Federal Travel Regulations:

a. Total expenditures for domestic travel and training (salary of one attendee) shall not exceed the dollar values specified in the contract modification without the prior written approval of the Contracting Officer.

b. The cost of travel by privately-owned automobile shall be reimbursed at the rate established by the Federal Travel Regulations (http://www.gsa.gov/portal/category/26429). Such reimbursement, however, shall not exceed the otherwise allowable comparative cost of travel by common carrier.

c. Miscellaneous travel expenses (i.e., parking fees, taxi fare, tolls, etc.) shall be reimbursed by CPSC. Reimbursement receipts MUST be presented for ground transportation to and from airports for any amount over $75.00; other than privately-owned vehicle (see paragraph b above). However, a receipt for all expenditures is advisable.

d. Reasonable actual costs of meals and incidental expenditures (M&IE) shall be reimbursed at a limit of $69.00 per full day, as established by the Federal Travel Regulations. The first and last day of travel is paid at three quarters (3/4ths) of the rate ($51.75 per day). The website that addresses these rates is http://www.gsa.gov/portal/category/100120.

e. Domestic travel shall be undertaken by the mode and class of service most advantageous to the Government. This will normally require that the Contractor travel in coach accommodations.

f. Hotel accommodations will be provided by CPSC at no cost to the Contractor at a hotel to be determined. Incidental expenditures, i.e., hotel telephone calls, room service, laundry, etc. shall be paid by the travelers.

g. All air or train travel arrangements (if applicable) and airline or train tickets shall be made and purchased by the Contractor. The cost of the airline or train tickets will be reimbursed by CPSC to the Contractor.
h. The CPSC Contract Officer Representative will forward hotel arrangements, meeting location, and meeting dates to the Contractor as soon as they are available.